



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		50141.73
(b) Cash on Hand at Beginning of Reporting Period.....	6593.51	
(c) Total Receipts (from Line 19) .....	4167.01	38847.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	10760.52	88989.52
7. Total Disbursements (from Line 31).....	8000.00	86229.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2760.52	2760.52
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4021.27	26898.60
(ii) Unitemized .....	145.74	11949.19
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4167.01	38847.79
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4167.01	38847.79
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	4167.01	38847.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4167.01	38847.79

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	86000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	200.00
29. Other Disbursements .....	0.00	29.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8000.00	86229.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8000.00	86229.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4167.01	38847.79
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4167.01	38647.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Mary Beaulieu**  
Full Name (Last, First, Middle Initial)  
Mailing Address 134 Plantation Drive

City New Iberia	State LA	Zip Code 70563
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FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Director of Nursing
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

**Transaction ID : SA11AI.11664**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20 Bi-Weekly)

**B. Mary Beaulieu**  
Full Name (Last, First, Middle Initial)  
Mailing Address 134 Plantation Drive

City New Iberia	State LA	Zip Code 70563
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Director of Nursing
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

**Transaction ID : SA11AI.11665**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20 Bi-Weekly)

**C. Mary Beaulieu**  
Full Name (Last, First, Middle Initial)  
Mailing Address 134 Plantation Drive

City New Iberia	State LA	Zip Code 70563
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Director of Nursing
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2012

**Transaction ID : SA11AI.11666**

Amount of Each Receipt this Period  

20.00
-------

Payroll Deduction (\$20 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Angie Begnaud**

Mailing Address 645 Bellevue Plantation Road

City Lafayette	State LA	Zip Code 70503
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation DVP-Operations
-------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

**Transaction ID : SA11Al.11674**

Amount of Each Receipt this Period  
50.00

Payroll Deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Angie Begnaud**

Mailing Address 645 Bellevue Plantation Road

City Lafayette	State LA	Zip Code 70503
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation DVP-Operations
-------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

**Transaction ID : SA11Al.11675**

Amount of Each Receipt this Period  
50.00

Payroll Deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Angie Begnaud**

Mailing Address 645 Bellevue Plantation Road

City Lafayette	State LA	Zip Code 70503
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation DVP-Operations
-------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2012

**Transaction ID : SA11Al.11676**

Amount of Each Receipt this Period  
50.00

Payroll Deduction (\$50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 56
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Pam Bridges**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1625 Ormandy Drive

City Baton Rouge	State LA	Zip Code 70808
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FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Corporate Trainer
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

**Transaction ID : SA11Al.11707**

Amount of Each Receipt this Period  

30.00
-------

Payroll Deduction (\$30 Bi-Weekly)

**B. Pam Bridges**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1625 Ormandy Drive

City Baton Rouge	State LA	Zip Code 70808
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Corporate Trainer
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

**Transaction ID : SA11Al.11708**

Amount of Each Receipt this Period  

30.00
-------

Payroll Deduction (\$30 Bi-Weekly)

**C. Pam Bridges**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1625 Ormandy Drive

City Baton Rouge	State LA	Zip Code 70808
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I	Occupation Corporate Trainer
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2012

**Transaction ID : SA11Al.11709**

Amount of Each Receipt this Period  

30.00
-------

Payroll Deduction (\$30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Michelle Brown</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : SA11Al.11725</b>
Mailing Address 920 W 22nd Ave		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
City Covington	State LA	Zip Code 70434
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group	Occupation Team Leader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

Full Name (Last, First, Middle Initial) <b>B. Michelle Brown</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 13 / 2012 <b>Transaction ID : SA11Al.11726</b>
Mailing Address 920 W 22nd Ave		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
City Covington	State LA	Zip Code 70434
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group	Occupation Team Leader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	

Full Name (Last, First, Middle Initial) <b>C. Michelle Brown</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2012 <b>Transaction ID : SA11Al.11727</b>
Mailing Address 920 W 22nd Ave		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
City Covington	State LA	Zip Code 70434
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group	Occupation Team Leader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.26	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	28.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Carolyn Clark</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2012 <b>Transaction ID : SA11AI.11730</b>
Mailing Address 220 Greenhaven Dr, City Lafayette, State LA Zip Code 70508		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.03	

Full Name (Last, First, Middle Initial) <b>B. Linda Cloer</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2012 <b>Transaction ID : SA11AI.11731</b>
Mailing Address 8117 Spanish Oak Drive, City Gautier, State MS Zip Code 38553		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation DON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

Full Name (Last, First, Middle Initial) <b>C. Linda Cloer</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2012 <b>Transaction ID : SA11AI.11732</b>
Mailing Address 8117 Spanish Oak Drive, City Gautier, State MS Zip Code 38553		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation DON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	28.86
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Linda Cloer**  
Full Name (Last, First, Middle Initial)

Mailing Address 8117 Spanish Oak Drive,

City State Zip Code  
Gautier MS 38553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group DON

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**221.26**

Date of Receipt  
**11 / 21 / 2012**

**Transaction ID : SA11AI.11733**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**B. Jamie Cole**  
Full Name (Last, First, Middle Initial)

Mailing Address HC 71 box 65,

City State Zip Code  
Asbury WV 24916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group Office Assistant

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**210.00**

Date of Receipt  
**10 / 25 / 2012**

**Transaction ID : SA11AI.11772**

Amount of Each Receipt this Period  
**10.00**

Payroll Deduction (\$10 Bi-Weekly)

**C. Jamie Cole**  
Full Name (Last, First, Middle Initial)

Mailing Address HC 71 box 65,

City State Zip Code  
Asbury WV 24916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group Office Assistant

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**220.00**

Date of Receipt  
**11 / 13 / 2012**

**Transaction ID : SA11AI.11773**

Amount of Each Receipt this Period  
**10.00**

Payroll Deduction (\$10 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>29.62</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Jamie Cole</b>			Date of Receipt
Mailing Address HC 71 box 65,			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.11774</b>
Asbury	WV	24916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="9.00"/>
Name of Employer	Occupation	Payroll Deduction (\$10 Bi-Weekly)	
LHC Group	Office Assistant		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Candance Comeaux</b>			Date of Receipt
Mailing Address 2209 Belle Ruelle,			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.11734</b>
New Iberia	LA	70563	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="9.62"/>
Name of Employer	Occupation	Payroll Deduction (\$9.62 Bi-Weekly)	
LHC Group	PT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="202.02"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Candance Comeaux</b>			Date of Receipt
Mailing Address 2209 Belle Ruelle,			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.11735</b>
New Iberia	LA	70563	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="9.62"/>
Name of Employer	Occupation	Payroll Deduction (\$9.62 Bi-Weekly)	
LHC Group	PT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="211.64"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="29.24"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Candance Comeaux</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 21 / 2012 <b>Transaction ID : SA11Al.11736</b>
Mailing Address 2209 Belle Ruelle, City New Iberia State LA Zip Code 70563		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.26	

Full Name (Last, First, Middle Initial) <b>B. Kevin Crager</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : SA11Al.11677</b>
Mailing Address 110 Bafanridge City Hot Springs State AR Zip Code 71901		Amount of Each Receipt this Period 50.00 Payroll Deduction (\$50 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>c. Kevin Crager</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 13 / 2012 <b>Transaction ID : SA11Al.11678</b>
Mailing Address 110 Bafanridge City Hot Springs State AR Zip Code 71901		Amount of Each Receipt this Period 50.00 Payroll Deduction (\$50 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	109.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Kevin Crager</b>			Date of Receipt 11 / 21 / 2012 <b>Transaction ID : SA11AI.11679</b>
Mailing Address 110 Bafanridge			Amount of Each Receipt this Period 50.00
City Hot Springs	State AR	Zip Code 71901	Payroll Deduction (\$50 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1150.00	
Name of Employer LHC Group	Occupation DVP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Eric Cruickshank</b>			Date of Receipt 10 / 25 / 2012 <b>Transaction ID : SA11AI.11737</b>
Mailing Address 2206 Lacache,			Amount of Each Receipt this Period 9.62
City Lake Charles	State LA	Zip Code 70610	Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 202.02	
Name of Employer LHC Group	Occupation OT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Eric Cruickshank</b>			Date of Receipt 11 / 13 / 2012 <b>Transaction ID : SA11AI.11738</b>
Mailing Address 2206 Lacache,			Amount of Each Receipt this Period 9.62
City Lake Charles	State LA	Zip Code 70610	Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 211.64	
Name of Employer LHC Group	Occupation OT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	69.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Eric Cruickshank**  
Full Name (Last, First, Middle Initial)

Mailing Address 2206 Lacache,  
City Lake Charles State LA Zip Code 70610

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation OT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.26**

Date of Receipt **11 / 21 / 2012**  
Transaction ID : **SA11AI.11739**

Amount of Each Receipt this Period **9.62**  
Payroll Deduction (\$9.62 Bi-Weekly)

**B. Adrienne Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 8 Worthington Lane,  
City Parkersburg State WV Zip Code 26104

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation DON

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **202.02**

Date of Receipt **10 / 25 / 2012**  
Transaction ID : **SA11AI.11740**

Amount of Each Receipt this Period **9.62**  
Payroll Deduction (\$9.62 Bi-Weekly)

**C. Adrienne Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 8 Worthington Lane,  
City Parkersburg State WV Zip Code 26104

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation DON

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.64**

Date of Receipt **11 / 13 / 2012**  
Transaction ID : **SA11AI.11741**

Amount of Each Receipt this Period **9.62**  
Payroll Deduction (\$9.62 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>28.86</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Adrienne Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 8 Worthington Lane,

City Parkersburg      State WV      Zip Code 26104

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation DON

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.26**

Date of Receipt **11 / 21 / 2012**  
**Transaction ID : SA11AI.11742**

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**B. Anna DeLee**  
Full Name (Last, First, Middle Initial)

Mailing Address 17336 Hwy 432

City Clinton      State LA      Zip Code 70722

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation Director of Nursing

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**  
**Transaction ID : SA11AI.11852**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

**C. Anna DeLee**  
Full Name (Last, First, Middle Initial)

Mailing Address 17336 Hwy 432

City Clinton      State LA      Zip Code 70722

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation Director of Nursing

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 13 / 2012**  
**Transaction ID : SA11AI.11853**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>29.62</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Anna DeLee</b>		Date of Receipt
Mailing Address 17336 Hwy 432		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City Clinton	State LA	Zip Code 70722
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11Al.11854</b>
Name of Employer LHC Group		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Occupation Director of Nursing		Payroll Deduction (\$10 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Chris Duhon</b>		Date of Receipt
Mailing Address 10429 Rue de Duhon		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Abbeville	State LA	Zip Code 70510
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11Al.11710</b>
Name of Employer LHC Group		Amount of Each Receipt this Period <input type="text" value="30.00"/>
Occupation RN		Payroll Deduction (\$30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="630.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Chris Duhon</b>		Date of Receipt
Mailing Address 10429 Rue de Duhon		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City Abbeville	State LA	Zip Code 70510
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11Al.11711</b>
Name of Employer LHC Group		Amount of Each Receipt this Period <input type="text" value="30.00"/>
Occupation RN		Payroll Deduction (\$30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="660.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Chris Duhon**  
Full Name (Last, First, Middle Initial)

Mailing Address 10429 Rue de Duhon

City Abbeville      State LA      Zip Code 70510

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation RN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **690.00**

Date of Receipt **11 / 21 / 2012**

**Transaction ID : SA11AI.11712**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**B. Ronda Dupree**  
Full Name (Last, First, Middle Initial)

Mailing Address 130 Hwy 132

City Delhi      State LA      Zip Code 71232

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation State Operation Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt **10 / 25 / 2012**

**Transaction ID : SA11AI.11713**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**C. Ronda Dupree**  
Full Name (Last, First, Middle Initial)

Mailing Address 130 Hwy 132

City Delhi      State LA      Zip Code 71232

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation State Operation Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt **11 / 13 / 2012**

**Transaction ID : SA11AI.11714**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **90.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Ronda Dupree</b>			Date of Receipt
Mailing Address 130 Hwy 132			<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.11715</b>
Delhi	LA	71232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation		Payroll Deduction (\$30 Bi-Weekly)
LHC Group	State Operation Director		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="690.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Carlin Elrod</b>			Date of Receipt
Mailing Address 252 Fariview Street			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.11743</b>
Humboldt	TN	38343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="9.62"/>
Name of Employer	Occupation		Payroll Deduction (\$9.62 Bi-Weekly)
LHC Group	Physical Therapist		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="202.02"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Carlin Elrod</b>			Date of Receipt
Mailing Address 252 Fariview Street			<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.11744</b>
Humboldt	TN	38343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="9.62"/>
Name of Employer	Occupation		Payroll Deduction (\$9.62 Bi-Weekly)
LHC Group	Physical Therapist		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="211.64"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="49.24"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Carlin Elrod**  
Full Name (Last, First, Middle Initial)

Mailing Address 252 Farview Street

City Humboldt State TN Zip Code 38343

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Physical Therapist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **221.26**

Date of Receipt **11 / 21 / 2012**  
**Transaction ID : SA11Al.11745**

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**B. Eden Ezell**  
Full Name (Last, First, Middle Initial)

Mailing Address 114 Coconut Grove Circle

City Lafayette State LA Zip Code 70508

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation VP & Ass. Legal Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt **10 / 25 / 2012**  
**Transaction ID : SA11Al.11716**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**C. Eden Ezell**  
Full Name (Last, First, Middle Initial)

Mailing Address 114 Coconut Grove Circle

City Lafayette State LA Zip Code 70508

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation VP & Ass. Legal Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt **11 / 13 / 2012**  
**Transaction ID : SA11Al.11717**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **69.62**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Eden Ezell**  
Full Name (Last, First, Middle Initial)

Mailing Address 114 Coconut Grove Circle

City Lafayette State LA Zip Code 70508

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation VP & Ass. Legal Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **690.00**

Date of Receipt **11 / 21 / 2012**  
Transaction ID : **SA11AI.11718**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**B. Shayne Ferguson**  
Full Name (Last, First, Middle Initial)

Mailing Address 390 Thicket Drive,

City Elizabethtown, State KY Zip Code 42701

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation PT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **807.87**

Date of Receipt **10 / 25 / 2012**  
Transaction ID : **SA11AI.11792**

Amount of Each Receipt this Period **38.47**

Payroll Deduction (\$38.47 Bi-Weekly)

**C. Shayne Ferguson**  
Full Name (Last, First, Middle Initial)

Mailing Address 390 Thicket Drive,

City Elizabethtown, State KY Zip Code 42701

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation PT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **846.34**

Date of Receipt **11 / 13 / 2012**  
Transaction ID : **SA11AI.11793**

Amount of Each Receipt this Period **38.47**

Payroll Deduction (\$38.47 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional).....▶ **106.94**

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Shayne Ferguson</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2012 <b>Transaction ID : SA11AI.11794</b>
Mailing Address 390 Thicket Drive,		Amount of Each Receipt this Period 38.47
City Elizabethtown, State KY Zip Code 42701	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$38.47 Bi-Weekly)
Name of Employer LHC Group Occupation PT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 884.81

Full Name (Last, First, Middle Initial) <b>B. Lessley Fontenot</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2012 <b>Transaction ID : SA11AI.11801</b>
Mailing Address 2303 sandalwood Drive		Amount of Each Receipt this Period 25.00
City Lafayette State LA Zip Code 70570	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$25 Bi-Weekly)
Name of Employer LHC Group Occupation Area Sales Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00

Full Name (Last, First, Middle Initial) <b>C. Lessley Fontenot</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2012 <b>Transaction ID : SA11AI.11802</b>
Mailing Address 2303 sandalwood Drive		Amount of Each Receipt this Period 25.00
City Lafayette State LA Zip Code 70570	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$25 Bi-Weekly)
Name of Employer LHC Group Occupation Area Sales Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	88.47
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Lessley Fontenot</b>		Date of Receipt
Mailing Address 2303 sandalwood Drive		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City	State	Zip Code
Lafayette	LA	70570
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.11803</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	Payroll Deduction (\$25 Bi-Weekly)
LHC Group	Area Sales Manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="575.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jules Galiouras</b>		Date of Receipt
Mailing Address 804 Woodmont Dr.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Convington	LA	70433
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.11667</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	Payroll Deduction (\$20 Bi-Weekly)
LHC Group	DVP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="420.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jules Galiouras</b>		Date of Receipt
Mailing Address 804 Woodmont Dr.		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code
Convington	LA	70433
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.11668</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	Payroll Deduction (\$20 Bi-Weekly)
LHC Group	DVP	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="440.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="65.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Jules Galiouras</b>		Date of Receipt 11 / 21 / 2012 <b>Transaction ID : SA11Al.11669</b>
Mailing Address 804 Woodmont Dr.		Amount of Each Receipt this Period 20.00
City Convington	State LA	Zip Code 70433
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Group	Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) <b>B. Barbara Goodman</b>		Date of Receipt 10 / 25 / 2012 <b>Transaction ID : SA11Al.11798</b>
Mailing Address 420 W. Pinhook Road		Amount of Each Receipt this Period 15.00
City Lafayette	State LA	Zip Code 70503
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$15 Bi-Weekly)	
Name of Employer LHC Group	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) <b>C. Barbara Goodman</b>		Date of Receipt 11 / 13 / 2012 <b>Transaction ID : SA11Al.11799</b>
Mailing Address 420 W. Pinhook Road		Amount of Each Receipt this Period 15.00
City Lafayette	State LA	Zip Code 70503
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$15 Bi-Weekly)	
Name of Employer LHC Group	Occupation Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Barbara Goodman**  
Full Name (Last, First, Middle Initial)

Mailing Address 420 W. Pinhook Road

City Lafayette State LA Zip Code 70503

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Regional Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **11 / 21 / 2012**

**Transaction ID : SA11Al.11800**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15 Bi-Weekly)

**B. Mary Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 1528 Greenwich Circle

City Birmingham, State AL Zip Code 35226

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Operation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt **10 / 25 / 2012**

**Transaction ID : SA11Al.11719**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**c. Mary Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 1528 Greenwich Circle

City Birmingham, State AL Zip Code 35226

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Operation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt **11 / 13 / 2012**

**Transaction ID : SA11Al.11720**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **75.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Mary Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 1528 Greenwich Circle

City Birmingham, State AL Zip Code 35226

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Operation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **690.00**

Date of Receipt **11 / 21 / 2012**

**Transaction ID : SA11Al.11721**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**B. Christopher Hardy**  
Full Name (Last, First, Middle Initial)

Mailing Address 161 Rue Katherine,

City Opelousas State LA Zip Code 70570

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation OT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **202.02**

Date of Receipt **10 / 25 / 2012**

**Transaction ID : SA11Al.11746**

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**c. Christopher Hardy**  
Full Name (Last, First, Middle Initial)

Mailing Address 161 Rue Katherine,

City Opelousas State LA Zip Code 70570

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation OT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **211.64**

Date of Receipt **11 / 13 / 2012**

**Transaction ID : SA11Al.11747**

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **49.24**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 56
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Christopher Hardy**  
Full Name (Last, First, Middle Initial)

Mailing Address 161 Rue Katherine,

City Opelousas State LA Zip Code 70570

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation OT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.26**

Date of Receipt **11 / 21 / 2012**

**Transaction ID : SA11AI.11748**

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**B. Richard Hollier**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 95

City Opleousas State LA Zip Code 70571

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I Occupation Legal Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt **10 / 25 / 2012**

**Transaction ID : SA11AI.11825**

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

**C. Richard Hollier**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 95

City Opleousas State LA Zip Code 70571

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I Occupation Legal Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt **11 / 13 / 2012**

**Transaction ID : SA11AI.11826**

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>89.62</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 56
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Richard Hollier</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 21 / 2012 <b>Transaction ID : SA11Al.11827</b>
Mailing Address P.O. Box 95		Amount of Each Receipt this Period 40.00
City Opleousas	State LA	Zip Code 70571
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$40 Bi-Weekly)	
Name of Employer Louisiana Health Care Group, I	Occupation Legal Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	

Full Name (Last, First, Middle Initial) <b>B. Pamela Hooks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : SA11Al.11749</b>
Mailing Address 369 Sir Thomas Henry		Amount of Each Receipt this Period 9.62
City Opelousas	State LA	Zip Code 70570
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$9.62 Bi-Weekly)	
Name of Employer LHC Group	Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

Full Name (Last, First, Middle Initial) <b>C. Pamela Hooks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 13 / 2012 <b>Transaction ID : SA11Al.11750</b>
Mailing Address 369 Sir Thomas Henry		Amount of Each Receipt this Period 9.62
City Opelousas	State LA	Zip Code 70570
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$9.62 Bi-Weekly)	
Name of Employer LHC Group	Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	59.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 56  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Pamela Hooks**

Mailing Address 369 Sir Thomas Henry

City State Zip Code  
Opelousas LA 70570

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group RN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.26

Date of Receipt  
 /  /   
 11 / 21 / 2012  
**Transaction ID : SA11AI.11751**

Amount of Each Receipt this Period  
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Kathleen Keirle**

Mailing Address 907 Cindy Lane,

City State Zip Code  
Westminister MD 21157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group RN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.02

Date of Receipt  
 /  /   
 10 / 25 / 2012  
**Transaction ID : SA11AI.11752**

Amount of Each Receipt this Period  
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Kathleen Keirle**

Mailing Address 907 Cindy Lane,

City State Zip Code  
Westminister MD 21157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group RN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.64

Date of Receipt  
 /  /   
 11 / 13 / 2012  
**Transaction ID : SA11AI.11753**

Amount of Each Receipt this Period  
9.62

Payroll Deduction (\$9.62 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 28.86

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 56
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Kathleen Keirle</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2012 <b>Transaction ID : SA11Al.11755</b>
Mailing Address 907 Cindy Lane, City Westminister State MD Zip Code 21157		Amount of Each Receipt this Period 9.62 Payroll Deduction (\$9.62 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.26	

Full Name (Last, First, Middle Initial) <b>B. Melanie Kuehn</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2012 <b>Transaction ID : SA11Al.11680</b>
Mailing Address 4205 Persimmon Way City Lake Charles State LA Zip Code 70518		Amount of Each Receipt this Period 50.00 Payroll Deduction (\$50 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>C. Melanie Kuehn</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2012 <b>Transaction ID : SA11Al.11681</b>
Mailing Address 4205 Persimmon Way City Lake Charles State LA Zip Code 70518		Amount of Each Receipt this Period 50.00 Payroll Deduction (\$50 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	109.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Melanie Kuehn</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2012 <b>Transaction ID : SA11Al.11682</b>
Mailing Address 4205 Persimmon Way		Amount of Each Receipt this Period 50.00
City Lake Charles	State LA	Zip Code 70518
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50 Bi-Weekly)	
Name of Employer LHC Group	Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

Full Name (Last, First, Middle Initial) <b>B. Amy Laing</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2012 <b>Transaction ID : SA11Al.11722</b>
Mailing Address 238 Dogwood Springs Lane		Amount of Each Receipt this Period 30.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30 Bi-Weekly)	
Name of Employer LHC Group	Occupation State Market Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) <b>C. Amy Laing</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2012 <b>Transaction ID : SA11Al.11723</b>
Mailing Address 238 Dogwood Springs Lane		Amount of Each Receipt this Period 30.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$30 Bi-Weekly)	
Name of Employer LHC Group	Occupation State Market Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Amy Laing**

Mailing Address 238 Dogwood Springs Lane

City Mena State AR Zip Code 71953

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Market Developer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **690.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 21 / 2012**

**Transaction ID : SA11AI.11724**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Stephen Lepley**

Mailing Address 9235 Royal Mountain Drive

City Chattanooga State TN Zip Code 37421

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Business Development Consultan

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11AI.11775**

Amount of Each Receipt this Period  
**10.00**

Payroll Deduction (\$10 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Marcus Macip**

Mailing Address 469 Meghan Drive

City Opelusas State LA Zip Code 70570

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation VP/Chief Admin. Officer/Dir. Of HR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11AI.11788**

Amount of Each Receipt this Period  
**100.00**

Payroll Deduction (\$100 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **140.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Marcus Macip</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2012 <b>Transaction ID : SA11AI.11705</b>
Mailing Address 469 Meghan Drive		Amount of Each Receipt this Period 5.00
City Opelusas	State LA	Zip Code 70570
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation VP/Chief Admin. Officer/Dir. Of HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2105.00	
		Payroll Deduction (\$5 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Marcus Macip</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2012 <b>Transaction ID : SA11AI.11706</b>
Mailing Address 469 Meghan Drive		Amount of Each Receipt this Period 5.00
City Opelusas	State LA	Zip Code 70570
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation VP/Chief Admin. Officer/Dir. Of HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2110.00	
		Payroll Deduction (\$5 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Richard MacMillian</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2012 <b>Transaction ID : SA11AI.11831</b>
Mailing Address 324 Deer Park Trial		Amount of Each Receipt this Period 190.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation Legal Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3820.00	
		Payroll Deduction (\$190 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Richard MacMillian</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2012 <b>Transaction ID : SA11AI.11832</b>
Mailing Address 324 Deer Park Trial		Amount of Each Receipt this Period 190.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group	Occupation Legal Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4010.00	
		Payroll Deduction (\$190 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Richard MacMillian</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2012 <b>Transaction ID : SA11AI.11833</b>
Mailing Address 324 Deer Park Trial		Amount of Each Receipt this Period 190.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group	Occupation Legal Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200.00	
		Payroll Deduction (\$190 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Spencer Marks</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2012 <b>Transaction ID : SA11AI.11797</b>
Mailing Address 5467 Highway 182		Amount of Each Receipt this Period 10.00
City Opelousas	State LA	Zip Code 70570
FEC ID number of contributing federal political committee. C	Name of Employer LHC Group	Occupation Telecom Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
		Payroll Deduction (\$10 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	390.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Spencer Marks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5467 Highway 182

City Opelousas	State LA	Zip Code 70570
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Telecom Manager
-------------------------------	-------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

**Transaction ID : SA11Al.11790**

Amount of Each Receipt this Period  
10.00

Payroll Deduction (\$10 Bi-Weekly)

**B. Spencer Marks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5467 Highway 182

City Opelousas	State LA	Zip Code 70570
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Telecom Manager
-------------------------------	-------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2012

**Transaction ID : SA11Al.11791**

Amount of Each Receipt this Period  
10.00

Payroll Deduction (\$10 Bi-Weekly)

**C. Paul Mcdonald**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6120 Lindholm Dr,

City Mobile	State AL	Zip Code 36693
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation PTA
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

**Transaction ID : SA11Al.11776**

Amount of Each Receipt this Period  
10.00

Payroll Deduction (\$10 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Paul Mcdonald</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 13 / 2012 <b>Transaction ID : SA11Al.11777</b>
Mailing Address 6120 Lindholm Dr,		Amount of Each Receipt this Period 10.00
City State Zip Code Mobile AL 36693	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)
Name of Employer Occupation LHC Group PTA	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00

Full Name (Last, First, Middle Initial) <b>B. Paul Mcdonald</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2012 <b>Transaction ID : SA11Al.11778</b>
Mailing Address 6120 Lindholm Dr,		Amount of Each Receipt this Period 10.00
City State Zip Code Mobile AL 36693	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)
Name of Employer Occupation LHC Group PTA	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00

Full Name (Last, First, Middle Initial) <b>C. Keith Myers</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : SA11Al.11828</b>
Mailing Address 211 Morning Mist		Amount of Each Receipt this Period 40.00
City State Zip Code Sunset LA 70584	FEC ID number of contributing federal political committee. C	Payroll Deduction (\$40 Bi-Weekly)
Name of Employer Occupation The LHC Group President/CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Keith Myers</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2012 <b>Transaction ID : SA11Al.11829</b>
Mailing Address 211 Morning Mist		Amount of Each Receipt this Period 40.00
City Sunset	State LA	Zip Code 70584
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$40 Bi-Weekly)
Name of Employer The LHC Group	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	

Full Name (Last, First, Middle Initial) <b>B. Keith Myers</b>		Date of Receipt MM / DD / YYYY 11 / 21 / 2012 <b>Transaction ID : SA11Al.11830</b>
Mailing Address 211 Morning Mist		Amount of Each Receipt this Period 40.00
City Sunset	State LA	Zip Code 70584
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$40 Bi-Weekly)
Name of Employer The LHC Group	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	

Full Name (Last, First, Middle Initial) <b>C. Jessica Nelson</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2012 <b>Transaction ID : SA11Al.11804</b>
Mailing Address 4247 Parkridge Drive		Amount of Each Receipt this Period 25.00
City Benton	State LA	Zip Code 71006
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$25 Bi-Weekly)
Name of Employer LHC Group	Occupation State Market Development Dir.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Jessica Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4247 Parkridge Drive

City Benton	State LA	Zip Code 71006
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation State Market Development Dir.
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

**Transaction ID : SA11AI.11805**

Amount of Each Receipt this Period  

69.24
-------

Payroll Deduction (\$25 Bi-Weekly)

**B. Jessica Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4247 Parkridge Drive

City Benton	State LA	Zip Code 71006
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation State Market Development Dir.
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2012

**Transaction ID : SA11AI.11806**

Amount of Each Receipt this Period  

69.24
-------

Payroll Deduction (\$25 Bi-Weekly)

**C. Ted Pappas**  
Full Name (Last, First, Middle Initial)  
Mailing Address 440 Hwy 758

City Eunice	State LA	Zip Code 70535
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation PT
-------------------------------	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **404.04**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

**Transaction ID : SA11AI.11837**

Amount of Each Receipt this Period  

19.24
-------

Payroll Deduction (\$19.24 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>69.24</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Ted Pappas</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 13 / 2012 <b>Transaction ID : SA11AI.11838</b>
Mailing Address 440 Hwy 758		Amount of Each Receipt this Period 9.24
City Eunice	State LA	Zip Code 70535
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$19.24 Bi-Weekly)	
Name of Employer LHC Group	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.28	

Full Name (Last, First, Middle Initial) <b>B. Ted Pappas</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2012 <b>Transaction ID : SA11AI.11839</b>
Mailing Address 440 Hwy 758		Amount of Each Receipt this Period 9.24
City Eunice	State LA	Zip Code 70535
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$19.24 Bi-Weekly)	
Name of Employer LHC Group	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.52	

Full Name (Last, First, Middle Initial) <b>C. Linda Parlow</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : SA11AI.11756</b>
Mailing Address PO Box 15,		Amount of Each Receipt this Period 9.62
City Alamo	State TN	Zip Code 38001
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$9.62 Bi-Weekly)	
Name of Employer LHC Group	Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	48.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 56
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Linda Parlow**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15,

City Alamo State TN Zip Code 38001

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.64**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 13 / 2012**

**Transaction ID : SA11Al.11757**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**B. Linda Parlow**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15,

City Alamo State TN Zip Code 38001

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.26**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 21 / 2012**

**Transaction ID : SA11Al.11758**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**C. James Reed**  
Full Name (Last, First, Middle Initial)

Mailing Address 215 Republic Ave #2101

City Lafayette State LA Zip Code 70508

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation PT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **404.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : SA11Al.11840**

Amount of Each Receipt this Period  
**19.24**

Payroll Deduction (\$19.24 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>38.48</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. James Reed</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 21 / 2012 <b>Transaction ID : SA11Al.11841</b>
Mailing Address 215 Republic Ave #2101		Amount of Each Receipt this Period 19.24
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation PT	Payroll Deduction (\$19.24 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.28	

Full Name (Last, First, Middle Initial) <b>B. Katie Reiman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : SA11Al.11759</b>
Mailing Address 815 Pecan Drive,		Amount of Each Receipt this Period 9.62
City St Gabriel	State LA	Zip Code 70776
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation Speech Pathology	Payroll Deduction (\$9.62 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

Full Name (Last, First, Middle Initial) <b>C. Katie Reiman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 13 / 2012 <b>Transaction ID : SA11Al.11760</b>
Mailing Address 815 Pecan Drive,		Amount of Each Receipt this Period 9.62
City St Gabriel	State LA	Zip Code 70776
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation Speech Pathology	Payroll Deduction (\$9.62 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	38.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Katie Reiman</b>		Date of Receipt
Mailing Address 815 Pecan Drive,		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
City	State	Zip Code
St Gabriel	LA	70776
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.11761</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
LHC Group	Speech Pathology	<input type="text" value="9.62"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction (\$9.62 Bi-Weekly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="221.26"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. William Sanford</b>		Date of Receipt
Mailing Address 5502 Coteau Road		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
New Iberia	LA	70560
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.11779</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
LHC Group	CIO	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction (\$10 Bi-Weekly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. William Sanford</b>		Date of Receipt
Mailing Address 5502 Coteau Road		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code
New Iberia	LA	70560
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11Al.11780</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
LHC Group	CIO	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction (\$10 Bi-Weekly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="29.62"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. William Sanford</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2012 <b>Transaction ID : SA11Al.11781</b>
Mailing Address 5502 Coteau Road		Amount of Each Receipt this Period 87.00
City New Iberia	State LA	Zip Code 70560
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$10 Bi-Weekly)	
Name of Employer LHC Group	Occupation CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B. Albert Simien</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : SA11Al.11842</b>
Mailing Address 111 Shadowbrook Lane		Amount of Each Receipt this Period 87.00
City Youngsville	State LA	Zip Code 70592
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$38.50 Bi-Weekly)	
Name of Employer LGC Group	Occupation Director of Purchasing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 808.50	

Full Name (Last, First, Middle Initial) <b>C. Albert Simien</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 13 / 2012 <b>Transaction ID : SA11Al.11843</b>
Mailing Address 111 Shadowbrook Lane		Amount of Each Receipt this Period 87.00
City Youngsville	State LA	Zip Code 70592
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$38.50 Bi-Weekly)	
Name of Employer LGC Group	Occupation Director of Purchasing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 847.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	87.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Albert Simien**

Mailing Address 111 Shadowbrook Lane

City Youngsville State LA Zip Code 70592

FEC ID number of contributing federal political committee. **C**

Name of Employer LGC Group Occupation Director of Purchasing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **885.50**

Date of Receipt **11 / 21 / 2012**

**Transaction ID : SA11AI.11844**

Amount of Each Receipt this Period **38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Ann Spade**

Mailing Address 3994 Lost Pavement Road

City Parkersburg State WV Zip Code 26101

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation DON

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**

**Transaction ID : SA11AI.11782**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Ann Spade**

Mailing Address 3994 Lost Pavement Road

City Parkersburg State WV Zip Code 26101

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation DON

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 13 / 2012**

**Transaction ID : SA11AI.11783**

Amount of Each Receipt this Period **10.00**

Payroll Deduction (\$10 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>58.50</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Ann Spade**  
Full Name (Last, First, Middle Initial)

Mailing Address 3994 Lost Pavement Road

City Parkersburg      State WV      Zip Code 26101

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation DON

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 21 / 2012**

**Transaction ID : SA11AI.11784**

Amount of Each Receipt this Period **100.00**

Payroll Deduction (\$10 Bi-Weekly)

**B. Anita Stagg**  
Full Name (Last, First, Middle Initial)

Mailing Address 713 Winding Willows

City Bossier City      State LA      Zip Code 71111

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation DVP

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1050.00**

Date of Receipt **10 / 25 / 2012**

**Transaction ID : SA11AI.11683**

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50 Bi-Weekly)

**C. Anita Stagg**  
Full Name (Last, First, Middle Initial)

Mailing Address 713 Winding Willows

City Bossier City      State LA      Zip Code 71111

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group      Occupation DVP

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt **11 / 13 / 2012**

**Transaction ID : SA11AI.11684**

Amount of Each Receipt this Period **50.00**

Payroll Deduction (\$50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>110.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Anita Stagg**  
Full Name (Last, First, Middle Initial)

Mailing Address 713 Winding Willows

City State Zip Code  
Bossier City LA 71111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group DVP

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  
11 / 21 / 2012  
**Transaction ID : SA11AI.11685**

Amount of Each Receipt this Period  
50.00

Payroll Deduction (\$50 Bi-Weekly)

**B. Lori Stagg**  
Full Name (Last, First, Middle Initial)

Mailing Address 204 Founders St.

City State Zip Code  
Lafayette LA 70508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group DVP - Hospice Operations

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
630.00

Date of Receipt  
10 / 25 / 2012  
**Transaction ID : SA11AI.11848**

Amount of Each Receipt this Period  
30.00

Payroll Deduction (\$30 Bi-Weekly)

**C. Lori Stagg**  
Full Name (Last, First, Middle Initial)

Mailing Address 204 Founders St.

City State Zip Code  
Lafayette LA 70508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group DVP - Hospice Operations

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
660.00

Date of Receipt  
11 / 13 / 2012  
**Transaction ID : SA11AI.11849**

Amount of Each Receipt this Period  
30.00

Payroll Deduction (\$30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Lori Stagg</b>			Date of Receipt MM / DD / YYYY 11 / 21 / 2012 <b>Transaction ID : SA11Al.11850</b>
Mailing Address 204 Founders St.			Amount of Each Receipt this Period 30.00
City Lafayette	State LA	Zip Code 70508	Payroll Deduction (\$30 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Occupation DVP - Hospice Operations		
Name of Employer LHC Group	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 690.00

Full Name (Last, First, Middle Initial) <b>B. Tami Stout</b>			Date of Receipt MM / DD / YYYY 10 / 25 / 2012 <b>Transaction ID : SA11Al.11671</b>
Mailing Address 1113 Fawn Run			Amount of Each Receipt this Period 20.00
City Somerset,	State KY	Zip Code 92501	Payroll Deduction (\$20 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Occupation State Market Development Dir.		
Name of Employer LHC Group	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00

Full Name (Last, First, Middle Initial) <b>C. Tami Stout</b>			Date of Receipt MM / DD / YYYY 11 / 13 / 2012 <b>Transaction ID : SA11Al.11672</b>
Mailing Address 1113 Fawn Run			Amount of Each Receipt this Period 20.00
City Somerset,	State KY	Zip Code 92501	Payroll Deduction (\$20 Bi-Weekly)
FEC ID number of contributing federal political committee. C	Occupation State Market Development Dir.		
Name of Employer LHC Group	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Tami Stout**  
Full Name (Last, First, Middle Initial)

Mailing Address 1113 Fawn Run

City Somerset, State KY Zip Code 92501

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Market Development Dir.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **11 / 21 / 2012**

**Transaction ID : SA11AI.11673**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20 Bi-Weekly)

**B. Harold Taylor**  
Full Name (Last, First, Middle Initial)

Mailing Address 252 Purple Dawn Drive

City Sunset State LA Zip Code 70584

FEC ID number of contributing federal political committee. **C**

Name of Employer La. Home Care Group, Inc. Occupation Director of Purchasing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **808.50**

Date of Receipt **10 / 25 / 2012**

**Transaction ID : SA11AI.11845**

Amount of Each Receipt this Period **38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

**C. Harold Taylor**  
Full Name (Last, First, Middle Initial)

Mailing Address 252 Purple Dawn Drive

City Sunset State LA Zip Code 70584

FEC ID number of contributing federal political committee. **C**

Name of Employer La. Home Care Group, Inc. Occupation Director of Purchasing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **847.00**

Date of Receipt **11 / 13 / 2012**

**Transaction ID : SA11AI.11846**

Amount of Each Receipt this Period **38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **97.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Harold Taylor**  
Full Name (Last, First, Middle Initial)

Mailing Address 252 Purple Dawn Drive

City State Zip Code  
Sunset LA 70584

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
La. Home Care Group, Inc. Director of Purchasing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**885.50**

Date of Receipt  
**11 / 21 / 2012**

**Transaction ID : SA11AI.11847**

Amount of Each Receipt this Period  
**38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

**B. Gary Thietten**  
Full Name (Last, First, Middle Initial)

Mailing Address 10611 Pine Shadow Road

City State Zip Code  
South Jordan UT 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group VP of Corp. Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2100.00**

Date of Receipt  
**10 / 25 / 2012**

**Transaction ID : SA11AI.11785**

Amount of Each Receipt this Period  
**100.00**

Payroll Deduction (\$100 Bi-Weekly)

**C. Gary Thietten**  
Full Name (Last, First, Middle Initial)

Mailing Address 10611 Pine Shadow Road

City State Zip Code  
South Jordan UT 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LHC Group VP of Corp. Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2200.00**

Date of Receipt  
**11 / 13 / 2012**

**Transaction ID : SA11AI.11786**

Amount of Each Receipt this Period  
**100.00**

Payroll Deduction (\$100 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>238.50</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Gary Thietten**  
Full Name (Last, First, Middle Initial)

Mailing Address 10611 Pine Shadow Road

City South Jordan	State UT	Zip Code 84095
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation VP of Corp. Development
-------------------------------	---------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 21 / 2012  
**Transaction ID : SA11Al.11787**

Amount of Each Receipt this Period  
100.00

Payroll Deduction (\$100 Bi-Weekly)

**B. James Tobey**  
Full Name (Last, First, Middle Initial)

Mailing Address 465 Leo Avenue

City Shreveport	State LA	Zip Code 71105
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Director of Sales and Marketing
-------------------------------	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012  
**Transaction ID : SA11Al.11686**

Amount of Each Receipt this Period  
50.00

Payroll Deduction (\$50 Bi-Weekly)

**C. James Tobey**  
Full Name (Last, First, Middle Initial)

Mailing Address 465 Leo Avenue

City Shreveport	State LA	Zip Code 71105
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Director of Sales and Marketing
-------------------------------	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2012  
**Transaction ID : SA11Al.11687**

Amount of Each Receipt this Period  
50.00

Payroll Deduction (\$50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. James Tobey</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 21 / 2012 <b>Transaction ID : SA11AI.11688</b>
Mailing Address 465 Leo Avenue		Amount of Each Receipt this Period 50.00
City Shreveport	State LA	Zip Code 71105
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation Director of Sales and Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	
		Payroll Deduction (\$50 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Jackie Weeks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012 <b>Transaction ID : SA11AI.11762</b>
Mailing Address 4507 Briarwood Terrace,		Amount of Each Receipt this Period 9.62
City Marshall	State TX	Zip Code 75672
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	
		Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Jackie Weeks</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 13 / 2012 <b>Transaction ID : SA11AI.11763</b>
Mailing Address 4507 Briarwood Terrace,		Amount of Each Receipt this Period 9.62
City Marshall	State TX	Zip Code 75672
FEC ID number of contributing federal political committee.	C	
Name of Employer LHC Group	Occupation RN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	
		Payroll Deduction (\$9.62 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	69.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Jackie Weeks</b>		Date of Receipt
Mailing Address 4507 Briarwood Terrace,		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Marshall State TX Zip Code 75672		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.11764</b>
Name of Employer LHC Group Occupation RN		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="9.62"/>
Aggregate Year-to-Date ▼ <input type="text" value="221.26"/>		Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Christa Williams</b>		Date of Receipt
Mailing Address 1549 Camelot Dr,		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Henderson State KY Zip Code 42420		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.11765</b>
Name of Employer LHC Group Occupation RN		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="9.62"/>
Aggregate Year-to-Date ▼ <input type="text" value="202.02"/>		Payroll Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Christa Williams</b>		Date of Receipt
Mailing Address 1549 Camelot Dr,		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Henderson State KY Zip Code 42420		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.11766</b>
Name of Employer LHC Group Occupation RN		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="9.62"/>
Aggregate Year-to-Date ▼ <input type="text" value="211.64"/>		Payroll Deduction (\$9.62 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="28.86"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Christa Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 1549 Camelot Dr,  
City Henderson State KY Zip Code 42420

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation RN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.26**

Date of Receipt **11 / 21 / 2012**  
**Transaction ID : SA11AI.11767**

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**B. Cheryl Wyatt**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 279  
City Del Rio State TN Zip Code 37727

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation RN BM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **202.02**

Date of Receipt **10 / 25 / 2012**  
**Transaction ID : SA11AI.11768**

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**c. Cheryl Wyatt**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 279  
City Del Rio State TN Zip Code 37727

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation RN BM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.64**

Date of Receipt **11 / 13 / 2012**  
**Transaction ID : SA11AI.11769**

Amount of Each Receipt this Period **9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **28.86**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 56  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A.** Full Name (Last, First, Middle Initial)  
**Cheryl Wyatt**

Mailing Address P.O. Box 279

City Del Rio State TN Zip Code 37727

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation RN BM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.26**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 21 / 2012**

**Transaction ID : SA11AL11770**

Amount of Each Receipt this Period  
**9.62**

Payroll Deduction (\$9.62 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>9.62</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>4021.27</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. CARPER FOR SENATE**

Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR

City NEW CASTLE State DE Zip Code 19720

Purpose of Disbursement  
Donation

011

Candidate Name

**THOMAS R CARPER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: DE District: 00

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2012

**Transaction ID : SB23.11862**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. CHARLES BOUSTANY JR. FOR CONGRESS**

Mailing Address 2936 Johnston St.

City Lafayette State LA Zip Code 70503

Purpose of Disbursement  
donation

011

Candidate Name

**CHARLES DR. JR. BOUSTANY Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: LA District: 07

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

**Transaction ID : SB23.11857**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF MARY LANDRIEU INC**

Mailing Address 607 14TH STREET NW SUITE 800  
SUITE 1434

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Donation

011

Candidate Name

**MARY L LANDRIEU**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: LA District: 00

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

**Transaction ID : SB23.11856**

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6000.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

**A. GINGREY FOR CONGRESS, INC.**

Mailing Address PO BOX U

City MARIETTA State GA Zip Code 30060

Purpose of Disbursement  
Donation

011

Candidate Name

**J. PHILLIP GINGREY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District: 11

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 13 / 2012

**Transaction ID : SB23.11858**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. JIM GERLACH FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 87

City UWCHLAND State PA Zip Code 19480

Purpose of Disbursement  
Donation

011

Candidate Name

**JIM GERLACH**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 13 / 2012

**Transaction ID : SB23.11863**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2000.00

**TOTAL** This Period (last page this line number only)..... ▶

8000.00